



SL 2009-189 (H576)- Authorizes an LME to remove a provider's endorsement when a provider fails to allow access to the facility in accordance with rules established under G.S. 143B-139.1 (include rules governing monitoring) and in the event of an emergency or in response to a complaint related to the health or safety of a client.

SL 2009-186 (H673)- Directs LME's to develop a waiting list of persons with intellectual or developmental disabilities that are waiting for specific services. The Secretary is directed to establish criteria and rules relating how the date should be collected. The data is to include numbers of persons who are: (1) Waiting for residential services; (2) Potentially eligible for CAP-MRDD; (3) In need of other State funded services and supports.

SL 2009-191 (H672)- Requires single stream LMEs to report on the allocation of service dollars biannually and allow public comment on the allocation at a regularly scheduled LME board of directors meeting. The act requires any LME prior to proposing reducing State funding to HUD group homes and HUD apartments to have Departmental approval and hold a public hearing prior to reducing HUD funding. The act directs the Department to analyze the effectiveness of single-stream funding.

SL 2009-190 (H1087)- Extends the requirement to establish human rights committees to provider entities and renames these committees "client rights and human rights committees".



SL 2009-299 (S799)- Expands the death reporting requirement to include patients recently discharged (14 days) and requires the facility to report the death to the State protection and advocacy agency designated under the Developmental Disabilities Assistance and Bill of Rights Act (P.L. 106-402) as well as the Secretary. The act provides the following information related to the death is public information:

- The name, sex, age, and date of birth of the deceased.
- The name of the facility providing the report.
- The date, time, and location of the death.
- A brief description of the circumstances of death
- A list of all entities to whom the event was reported

Only applies to State Operated Facilities

SL 2009-361 (H1309)-Directs Secretary to adopt additional rules for residential facilities that treat individuals with TBI and makes changes to the NC Traumatic Brain Injury Advisory Council including renaming the council to the NC Brain Injury Advisory Council.

SL 2009-184 (H1088)- amends the State purchase and contract laws to exempt group purchases made by developmental centers, neuromedical treatment centers, and alcohol and drug abuse treatment centers through a competitive bidding purchasing program.

SL 2009- 490 (H884) directs the Department to establish a pilot program to study the use of electronic supervision devices as an alternative means of supervision during sleep hours at facilities for children and adolescents who have a primary diagnosis of mental illness and/or emotional disturbance. The act further directs the Commission for Mental Health, Developmental Disabilities, and Substance Abuse Services to adopt rules establishing standards for electronic monitoring and alternate staffing requirements at such facilities.



SL 2009-340 (H243) Provide if inpatient treatment is warranted, and a 24 hour facility is not immediately available or appropriate, the respondent may be detained at the site of the first examination and the custody order remains in effect for up to 7 days and provides a process for required release after that period of time. The Act expands the Involuntary Commitment Pilot program to 15 LMEs (allows a licensed clinical social worker, a masters level psychiatric nurse, or a masters level certified clinical addictions specialist to conduct the initial (first-level) examinations of individuals)

SL 2009-315 (H1189)- Requires a physician or eligible psychologist to contact the LME when a respondent has been scheduled for an appointment with an outpatient treatment center. The act also allows first examinations for involuntary commitment for mental illness to be conducted by telemedicine.

SL 2009-574 (H945) Mental Health Commitment Statutes (H.B. 718 – Brisson, Justus) – The Legislative Research Commission may study the involuntary commitment statutes in Chapter 122C of the General Statutes, in particular G.S. 122C-263(a), to determine if an individual lawfully ordered to undergo an examination by a physician or eligible psychologist is being appropriately supervised to protect the health and safety of the individual and others during the period of the individual's examination.



SL 2009-550 (H274) Section 1.1-1.3 and SL 2009-526 (H191) Section 2-

Section 1.1(a) & (b) modifies the appeals process for recipients by reducing the minimum days prior to the effective date of an adverse action that the Department shall provide proper notice and codifies that during the appeal an appellant has a right to services at the level or manner prior to the appeal.

Subsection (b) makes the following changes:

- Directs OAH to hear cases with 55 days of appeal (was 45 days)
- Provides hearings shall be conducted telephonically or by video conference, unless the appellant requests an in-person hearing. In-person hearings are to be in Wake County, but can be moved to the appellant's county of residence upon good cause shown.
- Stipulates continuances shall only be granted in accordance with NCAC rules (currently NCAC03.0118 would govern), continuances are not to be granted on the day of the hearing, and failure to appear (after proper notification) will result in an immediate dismissal.
- Authorizes petitioner to submit evidence obtained prior to and subsequent to the Department's action
- Provides that in each adverse action the hearing shall determine if the Department substantially prejudiced the rights of the appellant by exceeding its authority; acting erroneously; failing to use proper procedure; acting arbitrarily or capriciously; or failing to act as required by law.

Section 1.1(c) modifies the appeal process for community support providers as follows:

- Authorizes a hearing officer to take testimony and receive evidence by telephone or electronic means
- Removes a hearing officer's authority to subpoena the attendance of a witness
- Modifies what the Department must provide as a record of the hearing if the provider petitions for judicial review
- Requires a final decision to be rendered with 180 days (was 90 days) from the date of filing of the petition.